

## Complaint by a Prisoner For Violation of Civil Rights

### Instructions

1. You may use this form to file an action under 42 U.S.C. § 1983 to challenge a constitutional violation by a person who acts under the authority of a city, county, or state government.
2. You may also use this form to bring a civil rights action against a person who acts under the authority of the federal government. An action for a civil rights violation against a federal defendant is called a “Bivens” action, and is brought under 28 U.S.C. § 1331.
3. Make sure that the form is typed or neatly written.
4. You must tell the truth and sign the form. If you make a false statement, the court may sanction you.
5. You need to provide the facts which show that the defendant(s) did something to violate your constitutional right. You may submit additional letter-size pages if necessary to describe what happened. You do not need to cite law.
6. You must pay a fee of \$350. If the fee is paid, your complaint will be filed and the court will order the clerk to serve the complaint on the defendant(s), unless it is obvious that you cannot show a constitutional violation.
7. If you cannot pay the filing fee, you may ask to proceed *in forma pauperis* (as a poor person). To do that, you fill out a motion to proceed *in forma pauperis*. You must submit a certificate signed by an officer at your institution showing the amount of money that the institution is holding for you and attach a statement of your institution account for the past 6 months.
8. If you are allowed to proceed *in forma pauperis*, you will not have to pay the fee at the time you file your complaint. **You still have to pay the filing fee.** The \$350 will be taken out of your institution account in installments, and sent to the Clerk’s office. This is required by 28 U.S.C. § 1915. If your motion is granted, the court will order the Clerk to serve the complaint, unless it is obvious you cannot show a constitutional violation.
9. After you complete the complaint form, send the original and 1 copy, plus a copy for each defendant, to:  
Office of the Clerk of Court  
United States District Court of Wyoming  
2120 Capitol Avenue, Room 2141  
Cheyenne, WY 82001
10. **CAUTION: You must exhaust (use up) all the administrative remedies available to you, including appealing your grievances, before you can bring a civil rights action.**
11. When you file other documents, send the Clerk an original and 1 copy. (Remember to keep a copy of the complaint and other documents for yourself.) Also send a copy of any document you file (other than the complaint) to each defendant’s attorney. Include a certificate of service that shows when you mailed the document to the attorney. State the date you placed the document in the prison mailing system or gave the document to prison officials to mail, and state whether first-class postage has been prepaid.

**UNITED STATES DISTRICT COURT  
DISTRICT OF WYOMING**

|               |   |                |
|---------------|---|----------------|
|               | ) |                |
|               | ) |                |
|               | ) |                |
| Plaintiff(s), | ) |                |
|               | ) |                |
| vs.           | ) | Case No. _____ |
|               | ) |                |
|               | ) |                |
|               | ) |                |
|               | ) |                |
|               | ) |                |
|               | ) |                |
| Defendant(s). | ) |                |

**PRISONER CIVIL RIGHTS COMPLAINT**

Under 42 U.S.C. § 1983

**1. Plaintiff(s)**

- (a) Name: \_\_\_\_\_  
Aliases: \_\_\_\_\_  
Prisoner number: \_\_\_\_\_  
Place of confinement: \_\_\_\_\_  
Address: \_\_\_\_\_
- (b) Name: \_\_\_\_\_  
Aliases: \_\_\_\_\_  
Prisoner number: \_\_\_\_\_  
Place of confinement: \_\_\_\_\_  
Address: \_\_\_\_\_

(If there are more than 2 plaintiffs, list them using this format on a separate sheet of paper.)

**2. Defendant(s)**

- (a) Defendant: \_\_\_\_\_  
Title: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_  
How defendant is sued (as an individual, official capacity or both): \_\_\_\_\_  
Was defendant acting under color/authority of law? ☐ Yes ☐ No
- (b) Defendant: \_\_\_\_\_  
Title: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_  
How defendant is sued (as an individual, official capacity or both): \_\_\_\_\_  
Was defendant acting under color/authority of law? ☐ Yes ☐ No
- (c) Defendant: \_\_\_\_\_  
Title: \_\_\_\_\_  
Place of Employment: \_\_\_\_\_  
Address: \_\_\_\_\_  
How defendant is sued (as an individual, official capacity or both): \_\_\_\_\_  
Was defendant acting under color/authority of law? ☐ Yes ☐ No

(If you have more than 3 defendants, list them using this format on a separate sheet of paper.)

### 3. Statement of Claims

CLAIM ONE:

State here the constitutional right that the defendant(s) violated.

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Supporting facts:

Carefully tell what the defendant(s) did to violate the constitutional right you listed above. Name each person involved. Describe how the violation happened. Give the places and dates where each event took place. If your facts are not complete and do not show how the defendant(s) violated your rights, your complaint may be dismissed.

This image shows a single sheet of white paper with horizontal blue ruling lines. The lines are evenly spaced and run across the width of the page. There are no margins, text, or other markings on the paper.

CLAIM TWO:

State here the constitutional right that the defendant(s) violated.

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Supporting facts:

Carefully tell what the defendant(s) did to violate the constitutional right you listed above. Name each person involved. Describe how the violation happened. Give the places and dates where each event took place. If your facts are not complete and do not show how the defendant(s) violated your rights, your complaint may be dismissed.

[illegible]

(If you have additional claims, list them using this format on a separate sheet of paper.)

**4. Exhaustion of Administrative Remedies as to Claim One**

You are required to exhaust (use up) all your administrative remedies before bringing this action in federal court.

(a) Is there a grievance procedure at your institution? ☐ Yes ☐ No

(b) Have you filed a grievance about the facts in claim one? ☐ Yes ☐ No

(If you did not file a grievance, skip to d.)

(c) If your answer is YES:

1. Was the grievance: Informal ☐ Formal ☐ Both ☐

2. What was the result? \_\_\_\_\_

3. Did you appeal? ☐ Yes ☐ No

4. If you did appeal, what was the result? \_\_\_\_\_

(d) If your answer is NO, explain why you did not file a grievance: \_\_\_\_\_

**5. Exhaustion of Administrative Remedies as to Claim Two**

(a) Is there a grievance procedure at your institution? ☐ Yes ☐ No

(b) Have you filed a grievance about the facts in claim two? ☐ Yes ☐ No

(If you did not file a grievance, skip to d.)

(c) If your answer is YES:

1. Was the grievance: Informal ☐ Formal ☐ Both ☐

2. What was the result? \_\_\_\_\_

3. Did you appeal? ☐ Yes ☐ No

4. If you did appeal, what was the result? \_\_\_\_\_

\_\_\_\_\_

(d) If your answer is NO, explain why you did not file a grievance: \_\_\_\_\_

\_\_\_\_\_

**6. List all lawsuits you have filed in any state or federal court**

(a) Defendants: \_\_\_\_\_

Name of Court: \_\_\_\_\_

Result: \_\_\_\_\_

Date of result: \_\_\_\_\_

(b) Defendants: \_\_\_\_\_

Name of Court: \_\_\_\_\_

Result: \_\_\_\_\_

Date of result: \_\_\_\_\_

(If you have filed additional lawsuits, list them using this format on a separate sheet of paper.)

**7. Relief**

State briefly what you want the Court to do for you.

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

**Certificate of Truthfulness**

I certify that the facts in this complaint are true to the best of my knowledge, information and belief.  
I understand that if this certification is not correct, I may be sanctioned by the court.

Signed this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_.

\_\_\_\_\_  
Signature of plaintiff or plaintiffs

\_\_\_\_\_  
Print name of plaintiff or plaintiffs

**Certification of Mailing**

I declare under penalty of perjury that this Complaint was placed in the institutional mailing system  
or deposited with prison officials on the \_\_\_\_\_ (month, day, year).  
I attest that first-class postage has been prepaid.

Executed (signed) on \_\_\_\_\_. (date)

\_\_\_\_\_  
Signature of plaintiff or plaintiffs